

was approved by the Senate HELP, or Health, Education, Labor and Pensions Committee on a straight party line vote of 10-8, contains some consumer protections but it is unacceptable because most of the provisions would apply only to 48 million individuals covered by plans in which large employers act as their own insurers, leaving 110 million Americans in other plans unprotected. The Republican bill would grant appeal rights to an additional 75 million privately insured individuals but those rights would be quite restrictive. Appeals to an external reviewer would be allowed only when an insurer refused to pay for a procedure on the grounds that it was not medically necessary or was experimental. Critics say this would give health plans power to limit appeals by simply asserting that a denial is not based on medical necessity. It would exclude appeals where a plan unilaterally decided that the benefit was not covered under the contract, even if medical judgments were involved in that contract interpretation. The Republican bill does not adequately ensure access to specialty care by allowing a patient to see an out-of-network specialist if the plan has an insufficient number of specialists available. Both the Senate Democratic proposal, which has White House support, and a bipartisan bill sponsored by Senators JOHN CHAFEE, JOSEPH LIEBERMAN and others would be substantially stronger in allowing external review of coverage disputes and defining medical necessity and in giving enrollees greater rights to take health plans to court. The insurance lobby has already embarked on a media blitz to defeat any new regulations as too costly but consumer protections under the Democratic plan would increase health plan costs by only 2.8 percent, according to Congressional Budget Office estimates made last year.

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"Health plans should be made to deliver what they promise their enrollees and held accountable when they fail."

Mr. Speaker, I think that New York Times editorial really sums up what I am trying to say tonight which is the fact of the matter is that if the Patients' Bill of Rights, the Democratic Patients' Bill of Rights, would be substantially stronger in almost every aspect of managed care reform over the Republican proposal.

Now I just wanted to briefly mention again the important areas where the Patients' Bill of Rights, a Democratic bill of rights, really provides for a very good protection for patients.

Once again and most importantly, the Democratic Patients' Bill of Rights allows doctors and patients rather than insurance company bureaucrats to make medical decisions using the principles of good medicine.

In addition, it would first guarantee access to needed health care specialists. The Democratic bill provides access to emergency room services when and where the need arises. The Democratic bill provides continuity of care protections to assure patient care if a patient's health care provider is dropped. The Democrats' Patients' Bill of Rights gives access to a timely, internal and independent external appeals process, and the Democratic Patients' Bill of Rights assures that doctors and patients can openly discuss treatment options and not be gagged because the insurance company says that you cannot talk about something that is not covered.

The Patients' Bill of Rights would also assure that women have direct access to OB/GYN, and finally and almost as important really as the medical necessity issue is that the Democrats Patients' Bill of Rights provides an enforcement mechanism that ensures recourse for patients who have been maimed or die as a result of health plan actions.

Mr. Speaker, I sound very partisan this evening, and I do not mean to suggest that there are not Republican Members on the other side of the aisle that are supportive of the Patients' Bill of Rights or the types of protections that I think that are needed in a comprehensive HMO reform bill. I know that there are Members on the other side that would like to see these types of protections provided under the law. But the bottom line is that the Republican leadership, which is in charge of the House, keeps producing legislation or keeps proposing legislation both in the House and in the Senate that does not adequately protect patients, and I think it is very important that we not only move ahead in this session of Congress and quickly on HMO reform, but that we move ahead with an HMO reform that adequately protects patients' rights, that is comprehensive and addresses what I consider the major issue that my constituents and most Americans seem to be concerned about at this time.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. YOUNG of Florida (at the request of Mr. ARMEY) for today from 1:30 until 3:30 on account of a family emergency.

Mr. TAUZIN (at the request of Mr. ARMEY) for today and on April 29 on account of family illness.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. PALLONE) to revise and ex-

tend their remarks and include extraneous material:)

Mr. FILNER, for 5 minutes, today.

Ms. NORTON, for 5 minutes, today.

Mr. FALEOMAVAEGA, for 5 minutes, today.

Ms. WOOLSEY, for 5 minutes, today.

Mrs. NAPOLITANO, for 5 minutes, today.

Mr. BISHOP, for 5 minutes, today.

(The following Members (at the request of Mr. WHITFIELD) to revise and extend their remarks and include extraneous material:)

Mr. REGULA, for 5 minutes, today.

Ms. ROS-LEHTINEN, for 5 minutes each day, today and on April 29.

Mr. METCALF, for 5 minutes, today.

Mr. BEREUTER, for 5 minutes, today.

Mr. PAUL, for 5 minutes, today.

Mr. WHITFIELD, for 5 minutes, today.

Mr. JONES of North Carolina, for 5 minutes, each day, today and April 29.

Mr. SOUDER, for 5 minutes each day, today and April 29.

(The following Member (at his own request) to revise and extend his remarks and include extraneous material:)

Mr. OBEY, for 5 minutes, today.

BILL PRESENTED TO THE PRESIDENT

Mr. THOMAS, from the Committee on House Administration, reported that that committee did on this day present to the President, for his approval, a bill of the House of the following title:

H.R. 800. To provide for education flexibility partnerships.

ADJOURNMENT

Mr. PALLONE. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock and 33 minutes p.m.), the House adjourned until tomorrow, April 29, 1999, at 10 a.m.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 8 of rule XII, executive communications were taken from the Speaker's table and referred as follows:

1761. A letter from the Administrator, Commodity Credit Corporation, Department of Agriculture, transmitting the Department's final rule—Recourse Loan Regulations for Honey (RIN: 0560-AF62) received March 16, 1999, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Agriculture.

1762. A letter from the Administrator, Agricultural Marketing Service, Department of Agriculture, transmitting the Department's final rule—Nectarines and Peaches Grown in California; Revision of Handling Requirements for Fresh Nectarines and Peaches [Docket No. FV99-916-2 FR] received April 22, 1999, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Agriculture.

1763. A letter from the Administrator, Agricultural Marketing Service, Department of